

## Non-Natural Disaster Emergency Designation

and

### Authorization for an Exception to the Biweekly Maximum Earnings Limitation

#### Part 1. Non-Natural Disaster Emergency Designation

*(To be signed by the Administrator, Assistant Administrator, Associate Administrator, Regional Administrator, or his/her designee)*

**a. Designation:**

A non-natural disaster emergency, involving a direct threat to life or property, is in effect.

Region(s)/Office(s): Region 9

Type of non-natural disaster:

Location(s): Samoa, California

Date emergency began:

Date emergency to end:

EPA employees will be required to work overtime hours to complete this abandoned mine site tailings pile cleanup. This work is mission critical to protect the public from high levels of arsenic, lead and mercury which are on site, prevent the migration of contaminants and to work to protect waters of the US.

I therefore request approval of an exception to the biweekly maximum earnings limitation.

This exception should remain in effect until I notify the Human Resource Officer that the emergency has concluded, by completing Part 3 of this form. The exception will apply to the employees listed in Part 1b below. These employees are performing work directly related to resolving these emergencies. As the emergency continues, I may add employees to the list by notifying the Human Resource Officer.

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Date)

Serena A. McIlwain, Assistant Regional Administrator

(Title)

**b. Employees for whom the exception is requested:** *(attach a separate sheet if necessary)*

Name	SSN

*(After completing Part 1, forward this form to the Human Resource Officer. Retain a copy to be attached*

when completing Part 3 at the conclusion of the emergency.)

**Part 2. Authorization for Exception to the Biweekly Maximum Earnings Limitation**

*(To be completed by the Human Resource Officer)*

I authorize an exception to the biweekly earnings limitation for the employees listed in Part 1b. This exception is authorized according to the provisions of 5 CFR 550.106(a). The exception will remain in effect until I notify Financial Management Division by completing Part 4 of this form.

Effective date of the exception: \_\_\_\_\_  
*(Beginning of the pay period during which the emergency began.)*

\_\_\_\_\_  
Lizabeth Engebretson, Human Resources Officer

\_\_\_\_\_  
(Date)

*(Send to Financial Management Division, Headquarters Accounting Operations Branch, Payroll Section, PM-226. Retain a copy of this form to be attached when completing Part 4 at the conclusion of the emergency.)*

**Part 3. Notification of Conclusion of Non-Natural Disaster Emergency**

*(To be signed by the Administrator, Assistant Administrator, Associate Administrator, Regional Administrator, or his/her designee)*

I certify that the non-natural disaster emergency in Region(s)/Office(s) Region IX, which began on July 27, 2015 has concluded. The exception to the biweekly maximum earnings limitation, now in effect for the employees listed in Part 1b, is no longer required.

\_\_\_\_\_  
Serena A. McIlwain (Signature)

Termination of the exception to the biweekly  
limitation should be effective: 9/30/2015

\_\_\_\_\_  
Assistant Regional Administrator  
(Title)

\_\_\_\_\_  
(Date of conclusion of the emergency)

\_\_\_\_\_  
(Date)

*Forward this form to the Human Resource Officer. Attach copy of Part 1b.*

**Part 4. Authorization for Termination of Exception to the Biweekly Maximum Earnings Limitation**

*(To be completed by the Human Resource Officer)*

I authorize the termination of the exception to the biweekly earnings limitation that is currently in effect for the employees listed in Part 1b. The biweekly limitation will be reinstated.

Effective date of the termination: \_\_\_\_\_

*(End of the pay period during which the emergency concluded.)*

Lizabeth Engebretson, Human Resources Officer

(Date)

*(Send to Financial Management Division, Headquarters Accounting Operations Branch, Payroll Section, PM-226. Retain a copy of this form to be attached when completing Part 4 at the conclusion of the emergency.)*

Appendix 3

## Request for Exception to the Biweekly Maximum Earnings Limitation

**Instructions:** Parts 1, 2 and 3 will be completed by the Regional Administrator, Assistant Administrator, Associate Administrator or his/her designee. For emergencies affecting more than one Region or Headquarters Office, the Director, Emergency Response Division, OSWER, will coordinate completion of this form, with input from an affected Regions or Headquarters Offices.

Parts 1 and 2 will be detached from this form and used as an attachment to a memorandum from the Director, OHRM, to the Office of Personnel Management (OPM) when requesting approval of an exception. After Parts 1 and 2 are detached, a copy should be retained by the Director, OHRM, to be attached to Parts 4 and 5 when he/she completes those parts of the form.

Parts 3, 4, and 5 are for EPA's internal use after receipt of approval from OPM of an exception.

### Part 1. Description of the Emergency

#### a. Type of emergency:

High levels of arsenic, lead and mercury contamination in mine tailings, soils and stream sediment at the Sheldon Mine Site present significant threats to human health and the environment. EPA will mobilize staff and contractors to remove contaminated soils from nine (9) residential properties located near the mine tailings disposal areas, incorporate them into a repository, and construct a soil and vegetative cap over the top and slopes of the repository to isolate, encapsulate, and prevent the migration of contaminants to air, surface water and groundwater. In addition, a large steep embankment composed of contaminated tailings below the athletic field at Jackson Junior High School will be capped using an application of shotcrete to the slopes. Due to the remote location of the site and the need to bring personnel and equipment into this mountainous area, it is more economical to work 6, 10-hour days to complete the removal action more quickly. EPA has a short window of opportunity to complete the shotcrete work before the school children return to school from summer vacation on August 10.

#### b. Nature and extent of threats to life and property:

Arsenic, lead and mercury contaminated soils and tailings in high concentrations at the site are located in a residential area and in proximity to many family homes. As a result, the toxic metals

contamination presents a threat to human health and the environment. The Argonaut Mine tailings disposal areas are the primary source of toxic metals contamination on several properties and contaminated runoff from the site eventually flows to Jackson Creek and Lake Amador, popular fishing and recreational area.

**c. Location:**

Region (s)/Office(s): Region 9

State(s): California

**d. Date emergency began:**

**e. Estimated duration of emergency:**

The deployment will last approximately 8 weeks. The OSC will make every effort to comply with EPA Region 9 ERS site travel duration policy and be on travel for no longer than two consecutive weeks. An alternate OSC will provide relief for at least a one week. The primary OSC will need to re-deploy to address the release.

## **Part 2. Employees Covered by the Exception**

**a. Estimated number of employees performing work directly related to resolving the emergency:**

Two EPA OSC's will be required to perform work directly related to the abandoned mine site cleanup. The EPA OSC's will oversee the response team including ERRS (10), START (2)

**b. Estimated average number of overtime hours worked per pay period:**

Approximately 160 hours will be earned by one or two OSCs over the deployed pay periods. The estimate is based on 10-hour work days and 6-day work weeks.

**c. Types of work being performed:**

The OSC's will oversee all field activities performed by contractors mitigating human and environmental exposures to the hazardous substances. The OSC's are required to be on-site to ensure health & safety, authorize and direct all work activities, to interface with the public, media, and other stakeholders, and to track all response costs.

## **Part 3. List of Employees**

*(Attach a separate sheet if more space is needed.)*

Name	SSN

## **Part 4. Authorization of Exception to Biweekly Limitation on Earnings**

*(To be signed by the Director, OHRM. Attach a copy of the memorandum from OPM approving the exception.)*

In accordance with the Office of Personnel Management's approval, I authorize an exception to the biweekly limitation on earnings for the employees listed in Part 3. This exception will be in effect until any termination date that may be specified by OPM, or until I authorize termination by completing Part 5 of this form.

Effective date of exception: \_\_\_\_\_

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Date)

Serena A. McIlwain, Assistant Regional Administrator  
(Title)

*(Send to Financial Management Division, Headquarters Accounting Operations Branch, Payroll Section 11, PM-226. Retain a copy to be used for completing Part 5 when emergency has concluded.)*

---

**Part 5. Authorization to Terminate Exception to the Biweekly Limitation on Earnings**  
*(To be signed by the Director, OHRM)*

I authorize termination of the exception to the biweekly earnings limitation for the employees listed in Part 3.

Effective date of termination of exception: \_\_\_\_

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Date)

Director, OHRM  
(Title)

*(Send to Financial Management Division, Headquarters Accounting Operations Branch, Payroll Section, PM-226. Retain a copy in Office of Human Resources Management Division files.)*